Registration Form SMI Training Oxford, Mississippi Session February 10 - 12, 2004

Name & Title:	
Organization:	
Street Address 1:	
Street Address 2:	
City:	State: Zip Code:
Telephone Number:	Fax Number:
E-Mail:	
Name as it will appear on your badge: _	
Special Accommodation/Dietary Needs:	
Conference Registration Fee is \$55.00 p and Nutrition Service", and mail or fax	er person. Make checks or money orders payable to " <i>USDA, Food</i> forms to:
Oxford SN USDA, Foo 3101 Park	od and Nutrition Service, CN Division Center Drive, Room 632 , VA 22302
CONFERENCE IS CONDITIONAL UPO	FNS not later than January 30, 2004. <u>PARTICIPATION IN THIS</u> N RECEIPT OF YOUR PAYMENT. Your registration will not be
•	chers will be accepted. Registration fee covers the following meals:
•	scheduled breaks each day of the training.
Hotel Accommodations	
Have you reserved a room under the US Yes No	DA - SMI block at the Triplett Conference Center?
What name is your reservation under? _	
Confirmation Number?	

Reminder: Hotel reservation cutoff date is January 15, 2004!